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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Fee(s) Transmittal. T papers. Each addition	f mailing can only be used for his certificate cannot be used all paper, such as an assignment te of mailing or transmission.	for any other accompanying
MORGAN LEW	is & BOCKIUS LLI ANIA AVENUE NW DC 20004	o (61, 14, 1	OFFICE SOLVE	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsis transmitted to the USPTO (571) 273-2885, on the date indicated below.		
		3	MARKET			(Depositor's name)
· · ·			OE!		<del></del>	(Signature)
						(Date)
APPLICATION NO.	FILING DATE	FIRST NAME		VENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/762,261	05/29/2001	Gerald V. Q		nan JR.	044508-5001	2761
TITLE OF INVENTION:E	DOY RESPONSE HIV-	l envelope p	ROTEIN	<del>PE PROTEIN ASSOCIA</del> ASSOCIATED WI RESPONSE (Amen	<del>ted with a broadly ri</del> TH A BROADLY RE ded)	<del>EACTIVE</del> ACTIVE
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES NO	<del>\$700</del> ] \$1,400		\$0	[\$700]\$1,40	07/10/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS	j	
STUCKER, JEFFREY J 16				424-188100		
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PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Henry M. Ja	ee ackson Foundatio t of Military Me	low, no assignee data of this form is NOT a si  (B) on for the edicine	will appear oubstitute for fi RESIDENCE RC	n the patent. If an assign ling an assignment. CITY and STATE OR COCKVILLE, Mary		
4a. The following fee(s) are enclosed:  XI Issue Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies <u>five</u> (5)			bb. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0310 (enclose an extra copy of this form).			
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Authorized Signature West Smyth  Typed or printed name Robert Smyth				Date 617170	/2006 MBEYENE2 0000009 1 <del>9501</del> 4, 2006 18 <sup>801</sup> 50,80115.00 DA	1 500310 09762261
		1. The information is r	required to obt		he public which is to file (and	by the LISPTO to process

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